

The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:  
IPEA/ KR

PCT

CHAPTER II

DEMAND

under Article 31 of the Patent Cooperation Treaty:  
The undersigned requests that the international application specified below be the subject of  
international preliminary examination according to the Patent Cooperation Treaty. **08 JUN 2005**

For International Preliminary Examining Authority use only	
Identification of IPEA	Date of receipt of DEMAND
<b>Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION</b>	
International application No. <b>PCT/KR03/002692</b>	International filing date (day/month/year) <b>09/12/2003</b>
(Earliest) Priority date (day/month/year) <b>12/12/2002</b>	
Title of invention Solid bio-material for a sensor that detects bio-electric signals through the use of the characteristics and functions of bio-epidermal tissues and epidermal tissues of living organisms and the method for producing the same	
<b>Box No. II APPLICANT(S)</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)  <b>LEE, Sang Moon</b> Suite #1101, LG Twintel Bldg. 157-8 Samsung-Dong, Kangnam-Ku 135-090 Seoul Republic of Korea	Telephone No.  Facsimile No.  Teleprinter No.  Applicant's registration No. with the Office
State (that is, country) of nationality: <b>US</b>	State (that is, country) of residence: <b>KR</b>
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)     	
State (that is, country) of nationality:	State (that is, country) of residence:
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)     	
State (that is, country) of nationality:	State (that is, country) of residence:
<input type="checkbox"/> Further applicants are indicated on a continuation sheet.	

**Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**

The following person is  agent  common representative  
 and  has been appointed earlier and represents the applicant(s) also for international preliminary examination.  
 is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.  
 is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.

Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)</i>	Telephone No. 82-2-566-4448
LEE, Sang Jin 3rd Fl., Dukwon Bldg. 637-19 Yeoksam-dong, Gangnam-gu 135-080 Seoul Republic of Korea	Facsimile No. 82-2-564-0500
	Telex/Teletype No.
	Agent's registration No. with the Office

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

**Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION****Statement concerning amendments:\***

1. The applicant wishes the international preliminary examination to start on the basis of:
  - the international application as originally filed
  - the description  as originally filed  
 as amended under Article 34
  - the claims  as originally filed  
 as amended under Article 19 (together with any accompanying statement)  
 as amended under Article 34
  - the drawings  as originally filed  
 as amended under Article 34
2.  The applicant wishes any amendment to the claims under Article 19 to be considered as reversed.
3.  The applicant wishes the start of the international preliminary examination to be postponed until the expiration of the applicable time limit under Rule 69.1(d).
4.  The applicant expressly wishes the international preliminary examination to start earlier than at the expiration of the applicable time limit under Rule 54bis.1(a).

\* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

**Language for the purposes of international preliminary examination:** English .....

- which is the language in which the international application was filed.
- which is the language of a translation furnished for the purposes of international search.
- which is the language of publication of the international application.
- which is the language of the translation (to be) furnished for the purposes of international preliminary examination.

**Box No. V ELECTION OF STATES**

The filing of this demand constitutes the election of all Contracting States which are designated and are bound by Chapter II of the PCT.

**Box No. VI CHECK LIST**

The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:

1. translation of international application	: sheets	
2. amendments under Article 34	: 22 sheets	
3. copy (or, where required, translation) of amendments under Article 19	: sheets	
4. copy (or, where required, translation) of statement under Article 19	: sheets	
5. letter	: 1 sheets	
6. other (specify)	: sheets	

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received	not received
<input type="checkbox"/>	<input type="checkbox"/>

The demand is also accompanied by the item(s) marked below:

1. <input checked="" type="checkbox"/> fee calculation sheet	5. <input type="checkbox"/> statement explaining lack of signature
2. <input type="checkbox"/> original separate power of attorney	6. <input type="checkbox"/> sequence listing in computer readable form
3. <input type="checkbox"/> original general power of attorney	7. <input type="checkbox"/> tables in computer readable form related to a sequence listing
4. <input type="checkbox"/> copy of general power of attorney; reference number, if any:	8. <input type="checkbox"/> other (specify):

**Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE**

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).

LEE, Sang Jin

**For International Preliminary Examining Authority use only****1. Date of actual receipt of DEMAND:****2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):**

3.  The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply.

The applicant has been informed accordingly.

4.  The date of receipt of the demand is WITHIN the time limit of 19 months from the priority date as extended by virtue of Rule 80.5.

5.  Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

6.  The date of receipt of the demand is AFTER the expiration of the time limit under Rule 54bis.1(a) and item 7 or 8, below, does not apply.

7.  The date of receipt of the demand is WITHIN the time limit under Rule 54bis.1(a) as extended by virtue of Rule 80.5.

8.  Although the date of receipt of the demand is after the expiration of the time limit under Rule 54bis.1(a), the delay in arrival is EXCUSED pursuant to Rule 82.

**For International Bureau use only**

Demand received from IPEA on:

[별지 제65호의40서식]

PAYMENT OF FEES FOR INTERNATIONAL PRELIMINARY EXAMINATION

To : Commissioner of the Korean Intellectual Property Office

International Application No.		PCT/KR03/002692		International Filing Date	09/12/2003	Priority Date	12/12/2002
Applicant	Name	LEE, Sang Moon		Residence Reg. No.		Country of Nationality	U.S.A
	Address	Suite #1101, LG Twintel Bldg., 157-8 Samsung-dong, Kangnam-gu, Seoul, Korea					
Agent	Name	LEE, Sang-Jin	Agent's Code	9-1998-00344-3	Tel. No.	(82 2) 566-4448	
	Address	3rd Fl., Dukwon Bldg., 637-19 Yeoksam-dong, Gangnam-gu, Seoul, Korea					
Kind of Fee		<input checked="" type="checkbox"/> Preliminary Examination Fee <input checked="" type="checkbox"/> Handling Fee					
Amount of Fee		₩ 415,000					

Submitted hereby is a payment of fees pursuant to Article 106-25(2) of the Enforcement Regulations of the Patent Law.

Date(day/month/year) 12/07/2004

Applicant (Agent) Sang Jin LEE



\* Attached Document(s) :

1. Two copies of the fee calculation sheet
2. A copy of the document(s) substantiating the power of attorney, if any

210mm×297mm(보존용지(2종), 70g/m<sup>2</sup>)

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## PCT

## FEE CALCULATION SHEET

## Annex to the Demand

International application No.	PCT/KR03/002692	For International Preliminary Examining Authority use only
Applicant's or agent's file reference	PCT482	Date stamp of the IPEA
Applicant LEE, Sang Moon		
<b>CALCULATION OF PRESCRIBED FEES</b>		
1. Preliminary examination fee .....	225,000 Won	P
2. Handling fee ( <i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i> ) .....	190,000 Won	H
3. Total of prescribed fees <i>Add the amounts entered at P and H and enter total in the TOTAL box</i> .....	415,000 Won	TOTAL
<b>MODE OF PAYMENT</b>		
<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input checked="" type="checkbox"/> cash	
<input type="checkbox"/> cheque	<input type="checkbox"/> revenue stamps	
<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons	
<input type="checkbox"/> bank draft	<input type="checkbox"/> other ( <i>specify</i> ): _____	
<b>AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT</b> ( <i>This mode of payment may not be available at all IPEAs</i> )		
IPEA/ _____		
<input type="checkbox"/> Authorization to charge the total fees indicated above.	Deposit Account No.: _____	
<input type="checkbox"/> ( <i>This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit</i> ) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.	Date: _____	
	Name: _____	
	Signature: _____	